

DEPARTMENT OF SOCIAL SERVICES
744 P Street, Sacramento, CA 95814



May 26, 1993

ALL COUNTY LETTER NO. 93-34

TO: ALL COUNTY WELFARE DIRECTORS

<u>REASON FOR THIS TRANSMITTAL</u>	
<input type="checkbox"/>	State Law Change
<input type="checkbox"/>	Federal Law or Regulation Change
<input type="checkbox"/>	Court Order
<input type="checkbox"/>	Clarification Requested by One or More Counties
<input checked="" type="checkbox"/>	Initiated by CDSS

SUBJECT: PROVIDING NOTICE OF COLA INCREASE IN AFDC, RCA, ECA AND POSSIBLE DECREASE IN FOOD STAMPS

REFERENCES: ACL 92-52

This is to inform you that current law (W&I Code Sections 11452 and 11453) provides for an AFDC Cost-of-Living Adjustment (COLA) for Fiscal Year 1993/1994. The COLA affects only the Minimum Basic Standard of Adequate Care (MBSAC) and the derivative tables (In-Kind Income and 185 percent of MBSAC).

Unless there is independent action in the current session of the Legislature to override the provisions of W&I Code Sections 11452 and 11453, the MBSAC values will be increased by 1.67 percent effective July 1, 1993. Attachment I provides the AFDC Payment Standard tables to assist you in implementing the changes. Attachment II is the Notice of Action (NOA) informing recipients whose cash aid changes due to the increase of the MBSAC level.

State Budget

As you know, current state law does not provide for either an increase or a decrease to the Maximum Aid Payment (MAP) levels this fiscal year. The Administration's proposed budget includes a decrease to the MAP levels. However, due to the major uncertainty surrounding the state budget, you should use caution in assuming what changes to the MAP levels will occur effective July 1 or later.

Assistance Payment Demonstration Project

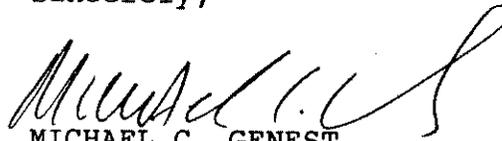
Information on applicants and recipients who are designated as members of the APDP Project's control group will be sent under separate cover.

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Contacts

If you have any AFDC Program questions, please contact Pam Kian at (916) 654-1801 or CALNET 464-1801. If there are Food Stamp Program questions, you may contact Suzanne McNamee at (916) 657-3815 or CALNET 437-3815.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael C. Genest". The signature is fluid and cursive, with a large loop at the end.

MICHAEL C. GENEST
Deputy Director
Welfare Programs Division

Attachments

Estimates Branch
April 29, 1993

A F D C P A Y M E N T S T A N D A R D S
E F F E C T I V E J U L Y 1, 1993

ASSISTANCE UNIT SIZE	MAXIMUM AID PAYMENT	MESAC	185% OF MESAC	I N - K I N D I N C O M E			80% OF MAP
				HOUSING	UTILITIES	FOOD CLOTHING	
1	307	351	649	157	33	27	245 x
2	504	576	1065 x	212	38	50	403
3	624	715	1322 x	231	41	77	499
4	743	848	1568 x	242	42	102	594
5	847	968	1790 x	242	42	130	677 x
6	952	1,088	2012 x	242	42	151	761 x
7	1,045	1,194	2208 x	242	42	162	836
8	1,139	1,302	2408 x	242	42	205	911
9	1,230	1,411	2610	242	42	233	984
10	1,322	1,533	2836	242	42	256	1057 x
More than 10	1,322	Add \$14 for each additional person					

Reference 44-315.311 44-315.311 44-207.113 44-115.311----- 44-402.1
44-211.531

x - Rounded down to the next lower whole dollar in accordance with 45 CFR Ch. II Sec. 233.20(a)(2)(iv).

State of California
Department of Social Services

Manual Msg. No.: M4.-315temp93
Action : Change
Issue: Law Change
Title: Increase MBSAC

Attachment II.

Auto ID No. :
Flow Chart No. :
Source :
Regulation Cite: 44-315.3

Form No. : NA 200
Effective Date : 07/01/93
Revision Date :

MESSAGE:

As of July 1, 1993 the County is changing
your monthly cash aid from \$ _____ to
\$ _____.

Here's why:

As of July 1, State Law makes the Basic Need
standard go up by 1.67 percent. See Section
B, Line 1 at the right for your new Basic
Need amount.

Your new cash aid amount is figured at the
right.

INSTRUCTIONS

This is a temporary message to be sent to clients whose cash aid is
changing as of July 1, 1993 due to the State Law that increases MBSAC as
of that date.

Use the message for all clients whose aid changes effective July 1 as a
result of the change in law.